Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

⊠No

☐ Yes

Not Applicable

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	V33404
1 Cornoration Name	100.0.

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Zip

City & State

D & D AUTOMOTIVE SERVICES, INC.					
Principal Place of Business	Mailing Address				
3202 53RD AVE E BRADENTON FL 34203	3202 53RD AVE E BRADENTON FL 34203				
Principal Place of Business 21	2a. Mailing Address				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				

27

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City & State

29 25 9. Name and Address of Current Registered Agent

SMALLWOOD, ROBERT T. I 1714 STICKNEY POINT RD.

Country

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90035 012 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

05/01/1992

65-0326490

5.' Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

Street Address (P.O. Box Number is Not Acceptable)

4. FEI Number

CHIP	E B8, POST OFFICE BOX 4613 N/A		83						
SARASOTA FL 34280-4613		63							
SAR	NOTA 1 E 042004010		84	City		FL	85 Z	ip Co	le
office or r	to the provisions of Sections 607.0502 and 607.1508, Floric egistered agent, or both, in the State of Florida. Such chan m familiar with, and accept the obligations of, Section 607.0	de was authorize	d by	the corporati	poration submits this statement for ion's board of directors. I hereby	r the purpose of o	hanging tment as	its regis	gistered tered
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registere	i Agen	t signature require	ed when reinstating)	DATE			
12.	OFFICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO	O OFFICERS AN	DIREC	CTOR	S IN 12
TITLE	PD D	ELETE 1.1 T	TLE				☐ Chan	ge	Addition
NAME	LOMBARDI, DAVID R.	1.2 N	AME						
STREET ADDRESS	3202 53RD AVE E	1.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	BRADENTON FL	1.4 0	ITY-S	r-ZIP				_	
TITLE		ELETE 2.1 T	TLE				☐ Chan	ge	☐ Addition
NAME	LOMBARDI, FRANK	2.2 N	AME	ĺ	•				
STREET ADDRESS	ACCO FORD AVE E	2.3 S	TREET	ADDRESS	**	•			
CITY-ST-ZIP	BRADENTON FL	2.40	2-YTK	T-ZIP					
TITLE	STD	ELETE 3.1 T	TLE				☐ Chan	ge	Addition
NAME	LOMBARDI, GRACE	3.2 N	AME						
STREET ADDRESS	3202 53RD AVE E	3.3 S	TREET	ADDRESS					
CITY-ST-ZIP	BRADENTON FL	3.4.0	ITY-S	T-ZIP					
TITLE		ELETE 4.1 T	ITLE				☐ Chan	ige	Addition
NAME		4.21	AME						
STREET ADDRESS		4.3 9	TREET	ADDRESS					
CITY-ST-ZIP		4.4 0	ITY-S	T-ZIP					
TITLE		ELETE 5.1 T	ITLE				Chan	ge	Addition
NAME		5.2 N	AME			•			
STREET ADDRESS		5.3 S	TREET	ADDRESS					
CITY-ST-ZIP			ITY-S	T-ZIP			_		
TITLE	[c □	ELETE 6.1 T	ITLE				☐ Chan	ge	Addition
NAME		6.2 N	AME						
STREET ADDRESS		6.3 S	TREE	ADDRESS					
CITY-ST-ZIP			ITY-S	_					
14. I hereby	certify that the information supplied with this filing does not	qualify for the exe	mpti	on stated in	Section 119.07(3)(i), Florida State	utes. I further certi	fy that the	he info	rmation

Country

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officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 60, or on an attach promite an address, with all other like empowered.

SIGNATURE: